

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>CTCRW9999999</b>		2. Page 1 of 1		3. Emergency Response Phone <b>1</b>		4. Waste Tracking Number <b>1069511</b>	
		5. Generator's Name and Mailing Address <b>US EPA REGION 1 - TURKEY BROOK OIL 20 MCLENNAN DRIVE OAKVILLE, CT 06799 617-9161206</b>		Generator's Site Address (if different than mailing address)					
6. Transporter 1 Company Name <b>TRADEBE TRANSPORTATION, LLC</b>		U.S. EPA ID Number <b>CTD021816889</b>							
7. Transporter 2 Company Name		U.S. EPA ID Number							
8. Designated Facility Name and Site Address <b>TRADEBE T&amp;R OF BRIDGEPORT, LLC 50 CROSS STREET BRIDGEPORT, CT 06610 (203)334-1666</b>		U.S. EPA ID Number <b>CTD002593887</b>							
Facility's Phone:									
9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.				
		No.	Type						
1. NON DOT / NON RCRA REGULATED MATERIAL ( OIL AND WATER)		X110	DM	X110	G	CR04			
2. NON DOT / NON RCRA REGULATED MATERIAL (OIL ABSORBANT BOOM)		X110	DM	1000	G	CR05			
3.									
4.									
13. Special Handling Instructions and Additional Information <b>002) ERG N/A 1000114457</b>									
14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.									
Generator's/Offor's Printed/Typed Name <i>James C. ...</i>		Signature <i>[Signature]</i>			Month <i>11</i>	Day <i>18</i>	Year <i>15</i>		
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: _____ Date leaving U.S.: _____							
16. Transporter Acknowledgment of Receipt of Materials									
Transporter 1 Printed/Typed Name <i>Sean Byrdon</i>		Signature <i>[Signature]</i>			Month <i>11</i>	Day <i>18</i>	Year <i>15</i>		
Transporter 2 Printed/Typed Name		Signature			Month	Day	Year		
17. Discrepancy									
17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
Manifest Reference Number:									
17b. Alternate Facility (or Generator)		U.S. EPA ID Number							
Facility's Phone:									
17c. Signature of Alternate Facility (or Generator)		Signature			Month	Day	Year		
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a									
Printed/Typed Name		Signature			Month	Day	Year		